PTO/SB/17 (01-06)

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| Fees pursuant to the Consolid | Complete if Known | | | | | | |
|---|------------------------|---|--------------------------|------------------------------|--|----------------------|-------------|
| FEE TRANSMITTAL | | | Application N | lumber 0 | 9/446,783 | | |
| FEE IK | Filing Date Ju | | June 26, 1998 (Intl.) | | | | |
| For | First Named Inventor N | | Neil P. DESAI | | | | |
| | Examiner Name N | | M. Hartley | | | | |
| Applicant claims sm | Art Unit 1 | | 1618 | | | | |
| TOTAL AMOUNT OF PA | Attorney Doci | ket No. 4 | 420052000126 | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | |
| x Deposit Account Deposit Account Number 03-1952 Deposit Account Name: Morrison & Foerster LLP | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | |
| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| FILING FEES SEARCH FEES EXAMINATION FEES | | | | | | | |
| Application Type | Fee (\$) | <u>Small Entity</u> <u>Fee (\$) Fee (</u> | <u>Small Enti</u> \$) | <u>ty</u> <u>Fee (\$)</u> | Small Entity Fee (\$) | Fees Paid (| (\$) |
| Utility | 300 | 150 500 | | 200 | 100 | <u>1 000 1 ala 1</u> | <u></u> |
| Design | 200 | 100 100 | | 130 | 65 | | |
| | | | | 160 | | | |
| Plant | 200 | | | | 80 | | |
| Reissue | 300 | 150 500 | | 600 | 300 | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) | | | | | | | |
| Fee Description Each claim over 20 (including Reissues) | | | | | | <u>Fee (\$) Fe</u> | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 | 100 |
| Multiple dependent claim | • | g Keissues) | | | | 360 | 180 |
| | | | | | | | |
| | Paid (\$) 0.00 | | | | | | |
| $\frac{2}{HP}$ = highest number of total claims paid for, if greater than 20. | | | 0.00 | | <u>: (≽) </u> | ee Paid (\$) 0.00 | |
| Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) | | | | | | | |
| | | | 0.00 | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE F | EE | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| <u>Total Sheets</u> | Extra Sheets | Number of each | additional 50 or | fraction thereof | | Fee Paid | <u>(\$)</u> |
| 100 = /50 | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 1255 Extension for response within fifth month | | | | | | 790.00 2,160.00 | |
| SUBMITTED BY | | | | | | | |
| Signature Signature | | | Registration No. | 44,140 | Telephone | (650) 813-429 | |
| | (Attorney/Agent) | 44,140 | | <u> </u> | | | |
| Name (Print/Type) Alicia Je | Hager | | | | Date | August 10, 20 | 106 |